

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Phase Shifting Of Neurological Signals In A
Medical Device System

Attorney Docket Number:: 11738.00138

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 33

Small Entity?:: NO

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Mark
Middle Name:: G.
Family Name:: Frei
Name Suffix::
City of Residence:: Lawrence
State or Province of Residence:: Kansas
Country of Residence:: USA
Street of mailing address:: 2513 Via Linda Drive
City of mailing address:: Lawrence
State or Province of mailing address:: Kansas
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 66047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: C.
Family Name:: Werder
Name Suffix::
City of Residence:: Corcoran
State or Province of Residence:: Minnesota
Country of Residence:: USA
Street of mailing address:: 23160 Meadowview Drive
City of mailing address:: Corcoran
State or Province of mailing address:: Minnesota

Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 55374

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: USA
 Status:: Full Capacity
 Given Name:: David
 Middle Name:: L.
 Family Name:: Carlson
 Name Suffix::

City of Residence:: Fridley
 State or Province of Residence:: Minnesota
 Country of Residence:: USA
 Street of mailing address:: 141 46TH Avenue NE

City of mailing address:: Fridley
 State or Province of mailing address:: Minnesota
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 55421

Correspondence Information

Correspondence Customer Number:: 22908

Representative Information

Representative Customer Number:: 22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/503,985	09/19/03
This Application	Non-Provisional of	60/418,527	10/15/02

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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Medtronic, Inc.
 Street of mailing address:: 710 Medtronic Parkway NE
 LC 340
 City of mailing address:: Minneapolis
 State or Province of mailing address:: Minnesota
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 55432